

LOCAL PUBLIC OFFICERS

2010 JAN - 6 PM 3: 15

FINANCIAL DISCLOSURE STATEMENT

GENERAL INFORMATION

- 1. Who should file a financial disclosure statement?
 - A. The Mayor and each member of the City/Town Council (hereafter referred to as local public officers).
 - B. Every candidate for mayor and councilmember.
- 2. Where should a financial disclosure statement be filed?

City/Town Clerk		
Ciry of Sedona	250	
Address		

102 Roadrunner Drive, Sedona, Arizona 86336

- 3. When should a financial disclosure statement be filed?
 - A. By every incumbent local public officer on or before the 31st day of January of each year, covering the previous calendar year.
 - B. By every local public officer appointed to fill a vacancy within 60 days following the filling of such vacancy, covering as his annual period the twelve-month period ending with the last full month prior to the date of taking office and thereafter on or before the 31st day of January of each year.
 - C. By every candidate for local public officer at the time of filing of the candidate's nomination papers for the preceding twelve-month period.
- 4. Violations: Penalties A.R.S. § 38-544.

Any local public officer or candidate for local public office who knowingly fails to file a financial disclosure statement required by an ordinance, rule, resolution or regulation of the City/Town, required by A.R.S. § 38-545, or who knowingly files an incomplete financial disclosure statement, or who knowingly files a false financial disclosure statement is guilty of a class 1 misdemeanor.

Any public officer, local public officer or candidate who violates this chapter is subject to a civil penalty of fifty dollars for each day of noncompliance but not more than five hundred dollars may be imposed as prescribed in A.R.S. § 16-924.

- 5. Definitions: Section 1 of Resolution No. 88-4
 - A. "Business" includes any enterprise, organization, trade, occupation or profession, whether or not operated as a legal entity or for profit, including any business trust, corporation, partnership, joint venture or sole proprietorship.
 - B. "Compensation" means anything of value or advantage, present or prospective, including the forgiveness of debt.
 - C. "Controlled business" means any business in which the local public officer or any member of his household has an ownership or beneficial interest, individually or combined, amounting to more than a fifty percent interest.
 - D. "Dependent business" means any business in which the local public officer or any member of his household has an ownership or beneficial interest, individually or combined, amounting to more than a ten percent interest, and during the preceding calendar year the business received from a single source more than ten thousand dollars and more than fifty per cent of its gross income.



- E. "Gift" includes any gratuity, special discount, favor, hospitality, service, economic opportunity, loan or other benefit received without equivalent consideration and not provided to members of the public at large.
- F. "Local public officer" means a person holding an elective office of the City/Town of Sedona
- G. "Member of household" means a local public officer's spouse and any minor child of whom the local public officer has legal custody.
- 6. Amount or Value Categories Section 2.

If an amount or value is required to be reported pursuant to this section, it is sufficient to report whether the amount or value of the <u>equity interest</u> falls within:

- A. CATEGORY 1 -One thousand dollars to twenty-five thousand dollars.
- B. CATEGORY 2 -More than twenty-five thousand dollars to one hundred thousand dollars.
- C. CATEGORY 3 -More than one hundred thousand dollars.
- 7. Information that is privileged or confidential by law need not be disclosed.

FINANCIAL DISCLOSURE STATEMENT

		/For you by L	and Dublic Officers of the City	2010 JAN -6 ON 3: 30	
Date	12	C-C-OC	ocal Public Officers of the City	For Calendar Year 2	09
			a	(Or other applicable period, ple	ease specify)
1.	GEN	ERAL INFORMATION	!		
	whic	h you and members of	s, and the name of each men your household did business tether a business is controlle	nber of your household. Also, list all name. Include controlled and dependent busing or dependent, or both.	nes under nesses (see
	(a)	Name of Local Public	Officer Ver	trey	
		Address 48 B	urrus LN S	le Don - AZ 86.	136
	(b)	Name of Local Public	Officer's Spouse Ma	caret Fren	
	(c)	Members of Househo	old \\ n \ \ a		
	•				
			A		
((d)	Names under which y		ers of your household (those persons list	ed in (a), (b)
					Controlled and/or
		c Officer or Household	Business Name	Business Address	Dependent Business
Je	<u> </u>	Frey	GEFTAVES	taut 48 Breasto	
		/ /	Properties	INC Sedine A281736	
			Fren Faverte	unt 49 Burnston	
			LLA	Selva, A29633	6
			Reneho Sedin	L 135 Beer William	
			Land Days Co. I		
			Reacho Selo		(,
		60.0	scHI > Harra		3(

2. SOURCES OF COMPENSATION

List names and addresses of all employers and all other sources of compensation in excess of \$1,000 received during the preceding calendar year by you, your spouse or members of your household (those persons listed in 1 (a), (b) and (c) above), or received by any other person for the use or benefit of you, your spouse or members of your household. Also, describe the nature of each employer's business and the services for which compensation was received.

You Need Not List:

Income to a business listed in 1 (d), specifically those individual sources of compensation that constituted a portion of the gross income of the business from which you or members of your household derived compensation.

Description of Employer's

Local Public Officer or Member of Household	Name & Address of Employer or Other Source of Compensation over \$1,000	Business <u>and</u> Individual's Services for Which Compensation Was Received
Murgaret Frey	Runch & Sedona	OXXice Manage.
	135 Ber, Willow Selven Al 8(3)	L.

3. INFORMATION ON CONTROLLED BUSINESS

In Columns (1) and (2) give the name of any controlled business and describe the goods or services provided by the business.

If a single source of compensation to the controlled business amounts to more than \$10,000 and 25 percent of the gross income of the business, indicate the nature of the goods and services provided to the customer or client and a description of the business activities if that customer or client is a business in Columns (3) and (4). If there is no such major client or customer, leave Columns (3) and (4) blank.

You Need Not List:

The identity of any customer or client.

The amount of income from any customer or client.

The activities of any customer or client which is not a business.

(1)	(2)	2010 JAN -6 PM 3: 30 Goods or Services	(4)
Name of Controlled Business (from Item 1 (d))	Goods or Services Provided by the Business	Provided to the Major Customer or Client (more than \$10,000 and 25% of Gross)	Business Activity of the Major Customer or Client, if a Business
			2
	444		
	5 8		
(Use additional sheet if there is	s more than one such major o	ustomer or client of a controlled I	husiness)
•			,
4. <u>INFORMATION ON DE</u>	PENDENT BUSINESS		
client. A dependent bus household also own more	iness may also be a controlle	alf of its income is dependent on ed business if the public officer of t in the business. If a dependent d in this item.	or members of his
	ervices provided by the busings activity if the major custon	ness, the goods or services provi ner or client is a business.	ided to the major customer
You Need Not List:			
The amount of inc	y customer or client. come from any customer or c ny customer or client which i		
(1)	(2)	(3)	(4)
Name of Dependent	Goods or Services	Goods or Services Provided to the Major Customer or Client (more than	Business Activity of the Major Customer or
Business (from item 1 (d))	Provided by the Business	\$10,000 and 50% of Gross)	Client, if a Business

43			

(Use additional sheet if there is more than one such major customer or client of a dependent business.)

5A. OWNERSHIP/BENEFICIAL INTEREST IN BUSINESS OR TRUST; INVESTMENTS

List the names and addresses of all businesses <u>and trusts</u> in which you or members of your household had an ownership or beneficial interest of over \$1,000 at any time during the preceding calendar year, together with a description of the interest and value of the equity interest by category number. You should list stocks, partnerships, joint ventures, sole proprietorships and other equity interests. Also, list beneficial interests in trusts.

Name and Address of Business or Trust	Local Public Officer or Member of Household	Description of Interest	Value of Equity by Category #
GFF FANGE	Inc Hypery July	5+.dk	
Gerell E F.	rey solina Ar 8t	336 truster	3
Bookston	- S. L A2 81	Book Stack	
2361 Canp	, s p		
Cc. 92612	<u> </u>	2	
5B. OFFICES OR FIDUCIA	RY RELATIONSHIPS IN BUSINES	SS OR TRUST	
any office or had a fiduce description of the office Regardless of any finance	resses of all businesses and trusts iary relationship at any time during or relationship. cial interest, you should list all busilent, treasurer, secretary or trustee	the preceding calendar year, . inesses and trusts of which yo	together with a
Name and Address of Business or Trust	Local Public Officer or Member of Household	Description of or Relationship	Office
GEF Investo Properties Inc 48 Burnellu Sa	ducks 46336	Frey Sec/7	Jup
Rouch Salar	Ive Merry	Frey Pre	SIVP
5 0 0 - W 11	U V LW		
JERUL E Fre	ytrust Derry	trey tru	stor
5 + Q. L. AZ 86	<u>ን ን </u>		

Your primary re Property used to Individual parce a dealer in re	for personal rec els and transac	creation by you. tions, if a controlled or dependen	t business is	
Location and Approximate Size of Realty in City/Town		Local Public Officer or Member of Household or Business from Items 3 or 4	Value of Equity by Category	Date Acquired or #Divested
10.55 Ac	2 8633	nly name of controlled or depend	ent business and aggre	gate value of
	number, of all	parcels held during the year.	Aggregate Value	
Name of Controlled or Deper Business Dealer in Real Pro		•	of Equity Interests by Category #	

List names and addresses of creditors to whom a controlled or dependent business owed a debt of more than \$10,000 which was also more than 30 percent of the total business indebtedness at any time during the

preceding calendar year.

6.

REAL PROPERTY OWNERSHIP IN CITY/TOWN OF

If the debt was incurred or discharged during the year, list whether it was incurred or discharged and the date.

You Need Not List:

Debts resulting from the ordinary conduct of a business <u>other than</u> a controlled or dependent business.

Credit card transactions.

Debts on residences or recreational property exempt from disclosure.

Retail installment contracts.

Debts on motor vehicles not used for commercial purposes.

Debts secured by cash values on life insurance.

Debts owed to relatives.

Any amounts.

PERSONAL DEBTS OVER \$1,000

Name and Address of Creditor (or Person to Whom Payments Are Made)	Date Local Public Officer or Member of Household Owing the Debt	Incurred and/or Discharged
	_	· · · · · · · · · · · · · · · · · · ·
<u>B</u> l	JSINESS DEBTS OVER \$10,000 AND	<u>0 30%</u>
Name and Address of Creditor (or Person to Whom Payments Are Made)	Date Local Public Officer or Member of Household Owing the Debt	Incurred and/or Discharged
Notional Be	NK Jerry Frey	I
PH AZ 85060		

8. **DEBTORS**

List the name of the debtor for each debt in excess of \$1,000 owed at any time during the preceding calendar year to you and members of your household or to any other person for the use or benefit of the aforementioned persons.

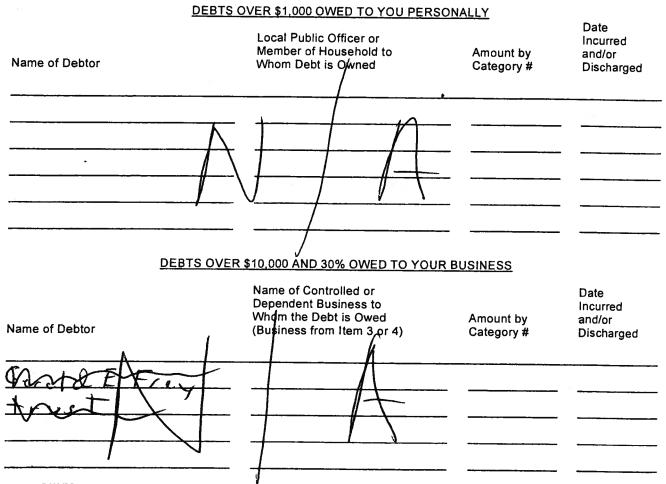
List the name of the debtor for each debt exceeding \$10,000 owed to a controlled or dependent business which was also more than 30 percent of the total indebtedness to the business at any time during the preceding calendar year.

Give the amount of each debt by category number.

If the debt was incurred or discharged during the year, list whether it was incurred or discharged and the date.

You Need Not List:

Those debts owed to you or members of your household resulting from the offinally conduct of a business other than a controlled or dependent business.



9. GIFTS

List each source of any gift or accumulated gifts in excess of \$500 in value received during the preceding calendar year by you, members of your household or by any other person for the use or benefit of the aforementioned persons.

You Need Not List:

Gifts received by will.

Gifts received by intestate succession.

Gifts received from intervivos (living) trusts established by a spouse or ancestor.

Gifts received from testamentary trusts established by a spouse or ancestor.

Gifts received from any other member of the household or relatives to the second degree of consanguinity. (Parents, grandparents, siblings, children and grandchildren of the recipient.)

Political campaign contributions if publicly reported as political campaign contributions.

Amounts.

Name	e of Donor of Gifts over \$500	Local Public Officer or Member of HouseholdRecipient
	A. A.	
10.	BUSINESS LICENSES List all business licenses issued, by the City/Town of State of the consideration of the application of the City of State of the City of	or by any other governmental agency on for such license by the C; + council any member of your household had an
Type Licen		g Type of Location of me Business Business
<u> </u>	Rench Selon Derry Lend cettle Horselle	Frey Selo-a A286336 Frey Sene As above
	Ruch Selve Derry Lud Der C. Ive Frey Invest LLP Derry	138 Bec - Well. 520. wc A181:
11.	LOCAL GOVERNMENT BONDS List all bonds, together with their value, issued by the gity/Town	of, any industrial development
	authority of such city or town or any nonprofit corporation organiany time during the preceding calendar year by you or any membersingle entity had a value in excess of \$1,000.	per of your household, which bonds issued by a
Bond \$1,00	If the bonds were acquired or divested during the year, list when date. Is Over Solution Local Public Office Member of House	Date Acquired er or Value by and/or

2010 JAN - 6 PM 3: 30 ERIFICATION

I do solemnly swear that a and correct and fully shows all informat	the foregoing Financial Disclosure Statement filed herewith is in all things true ion required to be reported by me pursuant to Resolution No
	Guld & Franch
Signature of A	ffiant
SUBSCRIBED and sworn to before me this day of	by Gerald & Frey JR.
Notary Public	Victoria Layne Stand
My Commission Expires:	participated to the control of the c
VUNE 20, 2013	

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